## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C.20549

Expires: April 30,2008 Estimated average burden

OMB Number:

3235-0076



OMB APPROVAL

## FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering ( Check if this is an amendment and name has changed, and indicate change.) First Light Petroleum Fund BT	)
Filing under(Check box(es) that apply): Rule 504 Rule 505 Rule 506  Type of Filing: New Filing Amendment	Section 4(6) ULOE
A.BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer(	.)
First Light Petroleum Fund BT	
Address of Executive Offices (Number and Street, City,State,Zip Code)  1005 Terminal Way Suite 110 Reno NV 89502	Telephone Number(Including Area Code) 775-324-7676
Address of Principal Business Operations (If different from Executive Offices)	Telephone Number(Including Area Code)
(Number and Street, City, State, Zip Code) 420 Pepperdine Ct. Goleta CA 93117	805-968-7303
Brief Description of Business: Investment Trust	PROCESSED AUS 2 8 2013
Type of Business Organization	
corporation limited partnership, already formed other (please specify	v):
business trust limited partnership, to be formed	TM-0000
Actual or Estimated Date of Incorporation or Organization:  MONTH YEAR  Actual	Estimated Estimated
Jurisdiction of Incorporate of Organization: (Enter two-letter U.S. Postal Service abbreviation for sta CN for Canada; FN for other foreign jurisdiction)	te: NV
GENERAL INSTRUCTIONS	
FEDERAL: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6)	), 17 CFR 230.501 et seq. or 15 U.S.C 77 d(6).
When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deem on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date o registered or certified mail to that address.	
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washigton, D.C. 20549.	
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any Co signed copy or bear typed or printed signatures.	opies not manully signed must be photocopies of the manually
Information Required: A new filing must contain all information requested. Amendments need only report the name of the is requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and Appe	
Filing Fee: There is no federal filing fee.	
State:  This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in the form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be frappendix to the notice constitutes a part of this notice and must be completed.	o be, or have been made. If a State requires the payment of a fee
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the federal exenthe appropriate federal notice will not result in a loss of an available state exemption unpredicated on the filing of a federal notice.	

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Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number

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	A.BASIC IDE	NTIFICATION DATA		
Enter the information requested for the     i. Each promoter of the issuer, if the is		in the past five years;		
Each beneficial owner having the poor more of a class of equity securities.				
iii. Each executive officer and director of				
partners of partnership issuers; and				
iv. Each general and managing partne	r of partnership issuers.			
Check Box(es) that apply:  Promot	er Beneficial Owner	Executive Officer Director		General and /or Managing Partner
Full Name(Last name first, if Individual)				
First Light Investment Company				
Business or Residence Address	•	treet, City,State ,Zip Code)		
1005 Terminal Way,Suite 110 Reno NV 895	02 		<u> </u>	
			ļ	
Check Box(es) that apply: Promot	er Beneficial Owner	X Executive Officer Director		General and /or Managing Partner
Full Name(Last name first, if Individual)			   	
Andrews John H				
Business or Residence Address	(Number and St	treet, City,State ,Zip Code)		
1005 Terminal Way, Suite 110 Reno NV 895	02		i	
Check Box(es) that apply: Promot	er Beneficial Owner	Executive Officer Director		General and /or Managing Partner
Full Name(Last name first, if Individual)				
Apte Daniel L		***		
Business or Residence Address		treet, City,State ,Zip Code)		
1005 Terminal Way, Suite 110 Reno NV 895	02	, , , , , , , , , , , , , , , , , , ,		
			·	

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B. INFORMATION ABOUT OFFERING	
	Yes No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	KI 🗆
Answer also in Appendix, Column 2, if filing under ULOE.	
2. What is the minimum investment that will be accepted from any individual?	\$ \$ 10,000.00
	Yes No
3. Does the offering permit joint ownership of a single unit?	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any	
commission or similar remuneration for solicitation of purchases in connection with sales of securities in the offering.	
If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and /or with a	
state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.	
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Name of Associated Broker or Dealer	
States in Which Person Listed has Solicited or Intends to Solicit Purchasers	
(Check "All States or check individual States)	All States
	_
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] FL] [GA]	](HI)
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN]	[MS] [MO]
	<del>-</del> -
[MT]	TIORI TIPAI T
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA [WV [WI] [	][OR] [[PA] [] ][WY [[PR] []

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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES	ANI	D USE	OF PROC	EEC	S	
1. Enter the aggregate offering price of securities included in this offering and the total amount all Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this box Indicate in the columns below the amounts of the securities offered for exchange and already expressions.	. [	and				
Type of Security			gregate ing price	Å	Amo	unt Already Sold
Debt	\$			\$		
Equity	\$			\$		
Common Preferred						
Convertible Securities(including warrants)	\$			\$		
Partnership Interests	\$			\$		
Other(Specify Units of Beneficial )	\$	\$50,0	00,000.00	\$		\$25,000.00
Total	\$	\$50,0	00,000.00	\$		\$25,000.00
Answer also in Appendix, Column 3, if filing under ULOE						
2.Enter the number of accredited and non-accredited investors who have purchased securities it this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504,indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero".	n		Number of Investors			Aggregate Pollar Amount of Purchases
Accredited Investors					\$	
Non-accredited Investors		_	1		\$	\$10,000.00
Total(for filing under Rule 504 only)		_	!		\$_	
Answer also in Appendix, Column 4, if filing under ULOE						
3. If this filing is for an offering under Rule 504 0r 505, enter the information requested for all second by the issuer, to date, in offerings of the types indicated, in the twelve(12) months prior to first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	the	3	Type o	f		Dollar Amount
Type of offering			securitie			Sold
Rule 505					\$	
Regulation A					- \$ - \$	
Regulation 504 Total					- <b>\$</b>	
4.a. Furnish a statement of all expenses in connection with the issuance and distribution of the in this offering. Exclude amounts relating solely to organization expenses of the issuer. The infimay be given as subject to future contingencies. If the amount of an expenditure is not known, estimate and check the box to the left of the estimate.	ormati	on				
Transfer Agent's Fees					<b>X</b>	\$0.00
Printing and Engraving Costs					×	\$0.00
Legal Fees					×	\$2,000.00
Accounting Fees					×	\$1,000.00
Engineering Fees					X	\$0.00
Sales Commissions (specify finders' fees separately)	•				X	\$0.00
Other Expenses(Identify) Management Fees					X	\$500,000.00
Total						\$503,000.00

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<ul> <li>Enter the difference between the aggregation 1 and total expenses furnished in the "adjusted gross proceeds to the issuer."</li> </ul>				\$	_	\$49,497,000.00		
<ol><li>Indicate below the amount of the adjusted grused for each of the purposes shown. If the estimate and check the box to the left of the equal the adjusted gross proceeds to the iss</li></ol>	ve.							
			Payment Officer Directors Affillate	s, , & .		Pa	ayments to Others	
Salaries and fees		KΠ	\$	\$50,0	00.00	K	\$	\$0.00
Purchase of real estate		H	\$		\$0.00	Ħ	\$	\$0.00
Purchase,rental or leasing and installa	tion of-machinery and equipment	F	\$		\$0.00		\$	\$0.00
Construction or leasing of plant buildin	gs and facilities		\$		\$0.00		\$	\$0.00
Acquisition of other business (including this offering that may be used in excha another issuer pursuant to a merger)	ange for the assets or securities of		\$		\$0.00		\$	\$0.00
Repayment of indebtedness		K I	\$		\$0.00	<b>₹</b>	\$	\$0.00
working capital		K	\$		\$0.00		\$	\$49,447,000.00
		ب	•			ш	Ť	<u></u>
-		•						
		. 27	¢		\$0.00	87	æ	\$0.00
Column Totals			\$ \$	\$50,0	<del>                                     </del>		\$	\$49,447,000.00
Total Payments Listed(column totals a	dded)			ł	│ <b>{</b> } │	\$ 4	9,49	7,000.00
	D.FEDERAL SIGNATURE						•	
The issuer has duly caused this notice to b Rule 505, the the following signature const Commission upon written request of its state to paragraph (b)(2) of Rule 502.	itutes an undertaking by the issuer to fur	nish to	the	U.S. Secui	ities a	and E	xcha	ange
Issuer(Print or Type)	Signa(ure / //	Dat	<u> </u>	<u> </u>	<u> </u>			
First Light Petroleum Fund BT	John Handrem	1	کا	14/0	XC	)		
Name of Signer(Print or Type)	Title of Signer(Print or Type)							
John H. Andrews	President & Secretary of Manager							
	ATTENTION							
Intentional misstatements or or	nissions of fact constitute federal crir	ninal v	iola	lions. (See	18 U	.s.c.	100	1.;
					ļ l			

AND AND AND AND THE TIMES OF THE PROPERTY OF T

	ASSIAN AND SIGNATURE STATE OF THE SAME	
Is any party described in 17 CFR 230.262 p provisions of such rule?	resently subject to any disqualification	Yes No
See A	Appendix, Column 5, for state response	
The undersigned issuer hereby undertakes notice on Form D(17 CFR 239.500) at such	to furnish to any state administrator of any state times as required by state law.	in which this notice is filed, a
The undersigned issuer hereby undertakes furnished by the issuer to offerees.	to furnish to the state administrators, upon writt	en request, information
the Uniform Limited Offering Exemption(UL	issuer is familiar with the conditions that must b OE) of the state in which this notice is filed and as the burden of establishing that these condition	understands that the issuer
The issuer has read this notification and knows its behalf by the undersigned duly authorized p	s the contents to be true and has duly caused to person.	nis notice to be signed on
Issuer(Print or Type) First Light Petroleum Fund BT	Signature John H ancheur	Date 81400
Name(Print or Type)	Title(Print or Type)	
John H. Andrews	President & Secretary of Manager	
Instruction: Print the name and title of the signing representanotice on Form D must be manually signed. Any or bear typed or printed signatures.	ative under his signature for the state portion of this for copies not manually signed must be photocopies of	orm. One copy of every the manually signed copy

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<b>APPENDIX</b>		100	

1	Inten to non-a	2 d to sell ccredited s in State	3 Type of Security and aggregate offering price offered in state	4  Type of investor and amount purchased in State				Disquali under Sta (if yes, explanation grate	fication te ULOE attach of waiver
State	Yes	No	Units of Beneficial \$ 50,000,000.00	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK						_			
AZ									
AR							ļ	ļ	
CA				·	<u> </u>				
СО				***					
CT									
DE							- L		
DC	***			<u> </u>					
FL									
GA							ļ		
HI									
ID				·			<u></u>		
IL.							<u> </u>		
IN									
IA									
KS									
KY									
LA	-								
ME									
MD								<u> </u>	
MA									
MI									
MN		_							
M\$									
МО								<u> </u>	

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## **APPENDIX**

1	Intend to non-ad	d to sell coredited s in State	3 Type of Security and aggregate offering price offered in state	amo	4  Type of investor a nunt purchased in	and n State		5 Disqualificatio under State UL (if yes, attach explanation of wa grated)		
State	Yes	No	Units of Beneficial \$ 50,000,000.00	Number of Accredited Investors	Amount	Number of Nor Accredited Investors	- Amount	Yes	No	
мт										
NE									,	
NV										
NH										
NJ										
NM										
NY										
NC										
ND				_						
ОН										
ок										
OR										
PA										
RI										
sc										
SD										
TN										
тх										
UT										
VΤ										
VA										
WA										
wv										
WI										
WY										
PR										

Foreign Investments total \$